

ISSUE SLIP STAPLE AREA (for additional cross references)

| F | ON | INITIALS | ID NO. | DATE |
|---------------------------|----|----------|----------|----------|
| FEE DETERMINATION | | | | |
| O.I.P.E. CLASSIFIER | | | 20 | 12/15 |
| FORMALITY REVIEW | | BE | TC 3-883 | 04-04-01 |
| RESPONSE FORMALITY REVIEW | | | | |

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
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